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*AN INTELLECTUAL PROPERTY LAW FIRM*

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**FACSIMILE TRANSMISSION COVER SHEET**

Date: September 8, 2005

To: United States Patent and Trademark Office  
Examiner: Vieaux, Gary; Art Unit: 2612

Fax: (571) 273-8300

Re: **Application Serial No.: 10/072,345**  
Filing Date: 10/23/2001; First-Named Inventor: Pine  
Attorney Docket No.: 0190142

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 16

Message:

Enclosed please find the Amendment and Response to Non-Final Office Action dated July 15, 2005.

Thank you.

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Attorney Docket No.: 0190142

## AMENDMENT COVER SHEET

IN RE APPLICATION OF: Pine, Joshua I.SERIAL NO.: 10/072,345 FILED: 10/23/2001FOR: Imaging System Combining Multiple Still Images for Higher Resolution Image OutputHONORABLE COMMISSIONER FOR PATENTS  
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

☒ No additional fee is required.☐ The fee has been calculated as shown below:☐ EXTENSION FEE

	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$
SECOND MONTH AFTER TIME PERIOD SET	450.00	225.00	\$
THIRD MONTH AFTER TIME PERIOD SET	1,020.00	510.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,590.00	795.00	\$

☐ TOTAL EXTENSION FEE \$ 0.00☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1 Number of Claims after Amendment	Column 2 Number Previously Paid for	Column 3 Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	20	MINUS **20	* = 0	x 50	x 25	\$
INDEPENDENT	3	MINUS ***3	* = 0	x 200	x 100	\$
First presentation of multiple dependent claim				+ 360	+ 180	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

\* If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.

\*\* If the number of Total Claims previously paid for is less than 20, write "20" in this space.

\*\*\* If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

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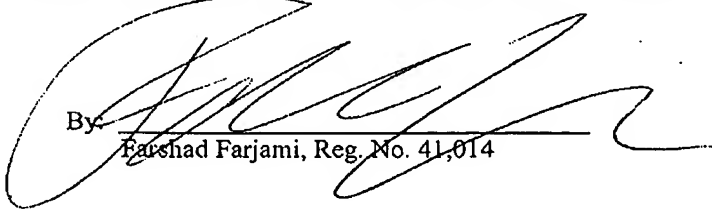
Attorney Docket No.: 0190142

- ☐ Enclosed is the total fee of \$ \_\_\_\_\_ (Payment by Credit Card, Form PTO-2038 Enclosed).
- ☐ Please charge Deposit Account No. 50-0731 in the amount of \$ \_\_\_\_\_
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.

Date:

9/6/05

By:

  
Farshad Farjami, Reg. No. 41,014CERTIFICATE OF FACSIMILE TRANSMISSION

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Date

9/8/05

Signature

Christina Carter

Name of Person Performing Facsimile Transmission

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Attorney Docket No.: 0190142

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- \* If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.  
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 \*\*\* If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

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Attorney Docket No.: 0190142

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Application Serial No.: 10/072,345  
Attorney Docket No.: 0190142

SEP 08 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Joshua I. Pine

Art Unit: 2612

Serial No.: 10/072,345

Examiner: Vieaux, Gary

Filed: October 23, 2001

For: Imaging System Combining Multiple  
Still Images for Higher Resolution Image  
Output

AMENDMENT AND RESPONSE TO NON-FINAL OFFICE ACTION

Honorable Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir/Madam:

This is in response to the Non-Final Office Action dated July 15, 2005 in the above-referenced patent application. Please enter and consider the following amendments and remarks.